

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	3739
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	BALLOON ALIGNMENT AND COLLAPSING SYSTEM
Attorney Docket Number::	TRANS 3.0-053 CIP
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	Fig. 1
Total Drawing Sheets::	6
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Patrick
Middle Name::	David
Family Name::	Lopath
City of Residence::	Rocky Point
Country of Residence::	NY
Street of mailing address::	64 Park Drive
City of mailing address::	Rocky Point
State or Province of mailing address::	NY

Postal or Zip Code of mailing address:: 11778

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Edward
Middle Name:: Paul
Family Name:: Harhen
City of Residence:: Duxbury
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 67 Meeting House Road
City of mailing address:: Duxbury
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02332

Correspondence Information

Correspondence Customer Number:: 000530

Representative Information

Representative Customer Number:: 000530

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/244,271	09/16/02

Assignee Information

Assignee name:: Transurgical, Inc.
Street of mailing address:: 220 Belle Meade Road
Suite 2
City of mailing address:: Setauket

State or Province of mailing address:: NY
Postal or Zip Code of mailing address:: 11733